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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

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13

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	A-034
First Named Inventor	Rafal, Howard et al.
COMPLETE IF KNOWN	
Application Number	09 / 778,281
Filing Date	February 7, 2001
Group Art Unit	2152
Examiner Name	Unassigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Methods and apparatus for creating and hosting customized virtual parties via the Internet

the specification of which
 is attached hereto (*Title of the Invention*)
OR
 was filed on (MM/DD/YYYY) **02/07/2001** as United States Application Number or PCT International

Application Number **09/778,281** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/180,933	Feb. 8, 2000	<input type="checkbox"/>

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)			
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: <input checked="" type="checkbox"/> Customer Number 021253 → <input type="checkbox"/> Place Customer Number Bar Code Label here OR <input type="checkbox"/> Registered practitioner(s) name/registration number listed below					
Name	Registration Number	Name	Registration Number		
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.					
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label 021253 OR <input type="checkbox"/> Correspondence address below					
Name	Charles G. Call				
Address	Patent Attorney				
Address	53 Saint Stephen Street				
City	Boston	State	MA		
Country	U.S.A.	Telephone	(617) 266-2925		
	Fax	(617) 424-6779			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Howard		Rafal			
Inventor's Signature	<i>Howard Rafal</i>			Date	8/10/01
Residence: City	Somerville	State	MA	Country	U.S.A.
Post Office Address	122 Heath Street				
Post Office Address					
City	Somerville	State	MA	ZIP	02145
	Country	U.S.A.			
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto					



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PTO/SB/02A (3-97)

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet
		Page <u>2</u> of <u>2</u>

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Anders		Eckman				
Inventor's Signature						Date
Residence: City	Andover	State	MA	Country	U.S.A.	Citizenship
Post Office Address	93 Salem Street					
Post Office Address						
City	Andover	State	MA	ZIP	01810	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Sidney		Probstein				
Inventor's Signature	<i>Sidney Probstein</i>					Date <u>8/10/01</u>
Residence: City	Brookline	State	MA	Country	U.S.A.	Citizenship
Post Office Address	99 Pond Street					
Post Office Address	Apt. 803					
City	Brookline	State	MA	ZIP	02445	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
City		State		ZIP		Country

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Anders

EKMAN Eckmann

Inventor's Signature

Date

3/16/01

Residence: City

Andover

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Country

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State

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ZIP

01810

Country

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Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

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Family Name or Surname

Sidney

Probstein

Inventor's Signature

Date

3/16/01

Residence: City

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MA

ZIP

02445

Country

U.S.A.

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

City

State

ZIP

Country

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